09/936403

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		6	9-20-01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	✗N		11-5-01

INDEX OF CLAIMS

✔	.... Rejected	N .... Non-elected
=	.... Allowed	I .... Interference
—	(Through numeral)... Canceled	A .... Appeal
÷	.... Restricted	O .... Objected

Claim		Date										Claim		Date										Claim		Date								
Final	Original											Final	Original												Final	Original									
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	2												52													102									
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	50												100													150									

If more than 150 claims or 10 actions
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